

Section 754

Section 754 EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF - 3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective: 4/1/2013

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois)*	Percent Change (+or-)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop/Hall		
15. Other: Allied Healthcare Professional Liability Life Insurance	189,746	-0.5%

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: N/A

Brief Description of filing. (If filing follows rates of an advisory
Organization, specify
organization):

The filing includes modifications to the class plans, Partnership/Corporation rule, Part-Time Practice rule & associated Comprehensive pages.

*Adjusted to reflect all prior rate changes

**Change in Company's premium level which will result from application of new rates.

THE MEDICAL-PROTECTIVE COMPANY

[Signature] Name of Company
Vice President
Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)**FORM (RF-3)****SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision
effective 01/01/2013.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Businessowners MedMal Life of Insurance	\$ 350,838	1.9 %

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: No applicable

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): We are filing pharmacy professional liability rates and a change to our rating algorithm for this coverage.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Pharmacists Mutual Insurance Company

Name of Company

Kenneth Andrews, Regional Vice President

Official – Title